



Docket No.: M1059.70000US01  
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Fred G. Benkley, III  
Serial No.: 10/689107  
Confirmation No.: 4260  
Filed: October 20, 2003  
For: SWIPED APERTURE CAPACITIVE FINGERPRINT SENSING  
SYSTEMS AND METHODS  
Examiner: A. W. Carter  
Art Unit: 2624

Certificate of Mailing Under 37 CFR 1.8(a)

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Dated: May 24, 2006

Doris A. Champagne  
Doris A. Champagne

STATUS INQUIRY

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

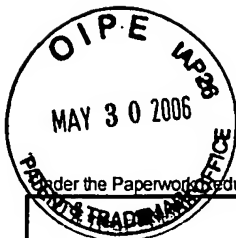
Dear Sir:

It is respectfully requested that the attorney named below be advised of the status of the above-identified application. Please advise us of when we might expect to receive an Office Action from the Patent and Trademark Office.

Dated: May 24, 2006

Respectfully submitted,

By William R. McClellan  
William R. McClellan  
Registration No.: 29,409  
WOLF, GREENFIELD & SACKS, P.C.  
Federal Reserve Plaza  
600 Atlantic Avenue  
Boston, Massachusetts 02210-2206  
(617) 646-8000



*DPW*

PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		Application Number	10/689107-Conf. #4260
		Filing Date	October 20, 2003
		First Named Inventor	Fred G. Benkley, III
		Art Unit	2624
		Examiner Name	A. W. Carter
Total Number of Pages in This Submission	2	Attorney Docket Number	M1059.70000US01

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	WOLF, GREENFIELD & SACKS, P.C.		
Signature	<i>William R. McClellan</i>		
Printed name	William R. McClellan		
Date	May 24, 2006	Reg. No.	29,409

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Dated: <u>May 24, 2006</u>	Signature: <u>Doris A. Champagne</u> (Doris A. Champagne)